

10/541090

FILED UNDER 35 U.S.C. 871

PATENT NUMBER and
ISSUE DATE

U.S. UTILITY Patent Application

APPLICATION NUMBER	FILING DATE	CLASS	SUBCLASS	GROUP ART UNIT	EXAMINER
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701

1157

(FACE)

NOTICE OF ALLOWANCE MAILED

Assistant Examiner

CLAIMS ALLOWED

Total Claims

Print Claim for
O.G.

ISSUE FEE

Amount Due

Date Paid

DRAWING

Sheets Draw.

Figs. Draw.

Print Fig.

 TERMINAL

DISCLAIMER

Primary Examiner

Application Examiner

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UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)

Charitta Burt, Paralegal

U. S. Application No. 10/541090

Publication Date 7-15-04

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Copy of ISR 9P, Copy of IPER

Assignee information:

Priority Info: Country GB No. 0235263.6 date 12/30/02 MORE

Correspondence checked: 29683 deposit account

Inventor Residence city: _____, state and/or country _____ citizenship: _____

International Application No. PCT _____ / _____ Language _____

Copy in International Application: ✓; Translation: yes _____ no _____ Spec.pg no. _____

371 Filing Fees: 100; US IPER meets Art. 33(2)-(3) Low fee applies: _____

Total Claims: 10 Chargeable 10 Independent 2 multiple _____

Number of drawing Sheets: 1 Foreign language: _____

Oath/Declaration: _____ signed _____ unsigned _____ defective _____ completed _____ Power of Attorney: _____

Small entity fee: _____ SME document yes _____ no _____

Bio Seq. Diskette: _____ entered _____ Bio Seq. Listing: _____ statement _____

Article 19 Amendment: _____; replaced by Article 34 Amdt. _____

Copy ISA References _____

Copy of IPER: _____; Annexes: _____ entered _____ not entered _____ Text sequence improper _____

Preliminary Amendment(s): ✓ date: 6/29/05; 2nd amendment date _____

IDS: ✓ DATE: 6/29/05 2nd DATE _____

Request for Immediate Examination: _____

Substitute Specification: _____ date: _____

Assignment: _____ forwarded to Assignment branch date: _____

Priority Document(s): ✓ Number of copies included 1

Date of 35 USC Receipt of Request: 6/23/05 Notes: _____

Date Completion USC 371 Requirements: _____ |

Notice of Missing Requirements: 12/10/05 |

Notice of Defective Response: _____ |

Notice of Acceptance: _____ |

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Other forms:

Extension of time: Number of months